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Signature of Sponsor

AMEND Senate Bill No. 777

House Bill No. 778*

by deleting all language after the enacting clause and substituting:

SECTION 1. Tennessee Code Annotated, Title 68, Chapter 1, Part 4, is amended by adding the following as a new section:

- (a) As used in this section:
- (1) "Chief medical officer" means the chief medical officer for the department of health;
- (2) "COVID-19" means the novel coronavirus, SARS-CoV-2, and coronavirus disease 2019, commonly referred to as COVID-19, including a mutation of SARS-CoV-2 or COVID-19;
- (3) "Vaccine" means a substance used to stimulate the production of antibodies and provide immunity against COVID-19, prepared from the causative agent of a disease, its products, or a synthetic substitute, treated to act as an antigen without inducing the disease, that is authorized or approved by the United States food and drug administration; and
 - (4) "Vaccine administration training program" means a training program:
 - (A) Approved by the Accreditation Council for Pharmacy
 Education (ACPE) related to vaccine administration; and
 - (B) Includes hands-on injection technique, clinical evaluation of indications and contraindications of vaccines, and the recognition and treatment of emergency reactions to vaccines.

(b)





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- (1) The commissioner has the power to declare an epidemic exists in this state. The declaration of an epidemic authorizes the chief medical officer to implement a statewide collaborative pharmacy practice agreement specific to vaccine dispensing and administration with a pharmacist licensed, and practicing, in this state for purposes of dispensing and administering a vaccine to this state's vulnerable population.
- (2) A pharmacist licensed, and practicing, in this state is authorized to dispense and administer a vaccine pursuant to a statewide collaborative pharmacy practice agreement executed by the chief medical officer.
- (3) The statewide collaborative pharmacy practice agreement authorized by the chief medical officer must include, but is not limited to, the following requirements:
 - (A) The vaccine or vaccines the agreement covers;
 - (B) The identification of a required vaccine administration training program that the pharmacist must complete before administering a vaccine pursuant to the agreement;
 - (C) Protocols for vaccine dispensation and administration;
 - (D) A requirement that a pharmacist dispensing or administering a vaccine pursuant to the agreement hold a current certificate in basic cardiopulmonary resuscitation;
 - (E) A requirement that a pharmacist dispensing or administering a vaccine pursuant to the agreement complete a minimum of two (2) hours of ACPE-approved, immunization-related continuing pharmacy education during each license renewal period while authorized to dispense and administer a vaccine under the agreement; and

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- (F) A requirement that a pharmacist dispensing or administering a vaccine pursuant to the agreement comply with recordkeeping and reporting requirements, including, but not limited to:
 - (i) Informing the patient's primary care provider if the patient identifies a primary care provider;
 - (ii) Submitting the required immunization information to Tennessee's vaccine registry;
 - (iii) Complying with requirements related to reporting adverse events; and
 - (iv) Reviewing the patient's vaccine history, if any, through Tennessee's vaccine registry or other vaccination records prior to administering a vaccine.
- (4) Before a pharmacist may enter into a statewide collaborative pharmacy practice agreement with the chief medical officer for the administration of a vaccine, the pharmacist must have documentation of completing a vaccine administration training program required pursuant to subdivision (b)(3)(B).
- (5) Upon entering a statewide collaborative pharmacy practice agreement pursuant to this section, a pharmacist must maintain a copy of the agreement and documentation of completion of the vaccine administration training program on file at the pharmacist's place of practice. The pharmacist must make these documents available to the department of health upon request.

SECTION 2. This act takes effect upon becoming a law, the public welfare requiring it.

House Health Subcommittee Am. #1

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Signature of Sponsor

AMEND Senate Bill No. 1243

House Bill No. 231*

by deleting all language after the enacting clause and substituting the following:

SECTION 1. Tennessee Code Annotated, Section 68-11-1602(7)(B), is amended by adding the following new subdivision:

(vii) Home care services provided under the federal Energy Employees

Occupational Illness Compensation Program Act of 2000 (EEOICPA)(42 U.S.C. § 7384 et seq.);

SECTION 2. Tennessee Code Annotated, Section 68-11-1602(9), is amended by deleting the subdivision and substituting the following:

- (9) "Home care organization":
- (A) Means an entity licensed as such by the department that is staffed and organized to provide home health services, or hospice services as defined by § 68-11-201, to patients in either their regular or temporary place of residence; and
- (B) Does not include home care services provided under the federal Energy Employees Occupational Illness Compensation Program Act of 2000 (EEOICPA)(42 U.S.C. § 7384 et seq.);

SECTION 3. Tennessee Code Annotated, Section 68-11-1607(I), is amended by deleting the subsection and substituting the following:

- (I) This part does not require a certificate of need:
- (1) For a home care organization that is authorized to provide only professional support services as defined in § 68-11-201; or





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(2) To establish an organization limited to providing home care services under the federal Energy Employees Occupational Illness Compensation Program Act of 2000 (EEOICPA)(42 U.S.C. § 7384 et seq.).

SECTION 4. This act takes effect upon becoming a law, the public welfare requiring it.

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Signature of Sponsor

AMEND Senate Bill No. 1267*

House Bill No. 1353

by deleting all language after the enacting clause and substituting:

SECTION 1. Tennessee Code Annotated, Section 63-7-105, is amended by adding the following as a new subsection (d):

(d)

- (1) Notwithstanding a law to the contrary, a graduate nurse may engage in the practice of professional nursing without a license for a period not to exceed one hundred twenty (120) calendar days from the date of receipt of the first authorization to take the NCLEX-RN examination if:
 - (A) The graduate nurse's practice occurs in a healthcare institution licensed under title 33 or 68, or an affiliate of the institution;
 - (B) The graduate nurse is at all times working under the supervision of an individual licensed to practice professional nursing pursuant to subsections (a)-(c); and
 - (C) The graduate nurse provides proof of the first authorization to take the NCLEX-RN examination to the healthcare institution or affiliate of the institution in which the graduate nurse is practicing.
 - (2) A graduate nurse is prohibited from:
 - (A) Being deemed a qualified registered nurse pursuant to § 63-7-103; and
 - (B) Using another title or identifying as anything but a "graduate nurse" in a clinical setting.





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- (3) As used in this subsection (d):
 - (A) "Graduate nurse" means an individual who:
 - (i) Holds a diploma or degree from an approved school of nursing that entitles the individual to take the NCLEX-RN licensing examination; and
 - (ii) Has received authorization to take the NCLEX-RN examination;
- (B) "NCLEX-RN" means the national council licensure examination for registered nurses; and
- (C) "Supervision" means that the graduate nurse's supervisor is located in the same unit as the graduate nurse when the graduate nurse is performing duties pursuant to this subsection (d).

SECTION 2. This act takes effect upon becoming a law, the public welfare requiring it.

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Signature of Sponsor

AMEND Senate Bill No. 615

House Bill No. 180*

by deleting all language after the enacting clause and substituting:

SECTION 1. Tennessee Code Annotated, Title 63, Chapter 1, Part 1, is amended by adding the following as a new section:

- (a) For purposes of this section:
 - (1) "Facility" has the same meaning as defined in § 68-11-201;
- (2) "Healthcare provider" means a person who is licensed, certified, or authorized or permitted by the laws of this state to administer health care in the ordinary course of business or practice of a profession; and
- (3) "Qualified mental health professional" has the same meaning as defined in § 33-1-101.
- (b) If a patient who is an inpatient in a licensed healthcare facility, or seeking services from an emergency department, expresses to a healthcare provider a recent threat or attempt at suicide or infliction of bodily harm to themselves, then the healthcare provider shall enter the attempt or threat into the patient's medical record. Upon discharge from the facility, the facility shall provide the patient with contact information to access a qualified mental health professional or counseling resource unless the patient is discharged to another facility. This referral requirement may be satisfied by providing contact information for this state's mobile crisis services or the statewide crisis hotline.
- (c) A healthcare provider who violates this section is subject to discipline by the healthcare provider's licensing authority.





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SECTION 2. This act takes effect July 1, 2021, the public welfare requiring it, and applies to facility admissions occurring on or after that date.

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